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TITLE: WAGE POLICY FOR WORK INJURY PROGRAM	PERSONNEL X ADMINISTRATIVE X	RESOLUTION NO: 95-558
EFFECTIVE DATE: May 4, 1995	TYPE: POLICY X PROCEDURE	SUPERSEDES: POLICY # PROCEDURE #

PURPOSE

To define the Board of Lucas County Commissioners= policy and procedure with regard to wages for the work injury program. This is a pilot program and may be discontinued or changed at any time at the Commissioners= discretion.

GENERAL

Anyone who is considered an employee within the various departments within the appointing authority of the Board of County Commissioners is eligible for this program. Length of employment shall not be a factor in eligibility, but shall be at the discretion of the Board of Commissioners.

This statement of policy recognizes that various appointing authorities, elected officials, valid labor agreements, and administrative policies may differ and it is our desire to stress that this policy is voluntary on the part of the employee and any other appointing authority participating in the Lucas County Workers= Compensation Fund.

Because it is anticipated that this program will benefit both the employee and the departments participating on State Fund Risk #PE480000, participation by the employee will continue normal benefits, but failure by the department outside the appointing authority of the Commissioners to participate may incur equalizing charges beyond experience rating.

PROGRAM CRITERIA

Participation in this program should be considered voluntary. Only those employees who have sustained a legitimate certified work-related injury, occupational disease or illness, that is likely to result in more than 7 days of lost time are eligible for this program.

Eligible participants must agree to the terms of the Work Injury Contract available through the Risk Management Department.

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INJURY PAY

When a regular employee is injured while doing their job, he/she is normally eligible for Workers= Compensation. Under the Work Injury Program, which replaces regular Workers= Compensation, the injured employee can receive full, regular payroll of the Lucas County Commissioners for as along as the injury prevents the employee from performing usual work duties. The period of work disability is no shorter or longer than it would be in the Workers= Compensation Program.

Injury pay extension requests require a ASTATEMENT OF ATTENDING PHYSICIAN≅ indicating the reason why an extension is needed beyond the original disability period. Without this document, pay extension may not be considered.

APPLICATION FOR WAGES

- 1. In all cases, an employee requesting wages for this program can contact their supervisor or union representative who, in turn must contact the Workers= Compensation Representative for application and referral. The Workers= Compensation Representative may also recommend a referral, provided they meet eligibility criteria.
- 2. Employee must have medical documentation from their physician to support their disability, and must clearly indicate a specific diagnosis, and give an estimated return to work date. A physician=s statement will be obtained to clearly indicate work restriction.

BENEFITS COVERAGE DURING WORK INJURY PROGRAM

1. While the employee is involved in this Work Injury Program, the employee will be retained on the County=s health plan. When an employee continues on the payroll and

is placed on Workers= Compensation or Work Injury Leave, health coverage will be maintained. The County will continue to cover the employee as stipulated in their own bargaining unit contract or departmental policy.		
2. Sick leave, vacation, and retiremen their bargaining unit or department policy.	t benefits will continue, only as it applies to	
APPROVED BY:	DATE:	